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TO: Commissioner for Patents
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Fax No: 703/872-9302

Pages (including cover page): 24

Date: April 8, 2004

OFFICIAL

FROM: Keith R. Haupt, Esq.
Reg. No. 37,638

Re: This fax includes: Amendment Transmittal; Amendment, Authorization to
Charge Deposit Account in the Amount of \$43.00.

Serial No.: 10/083,001
Filed: February 26, 2002
Art Unit: 3727
Examiner: Robin A. Hyton

Applicant: Jack S. Oh
Title: CLOSURE AND CONTAINER WITH
ANTI-BACKOFF CAPABILITY
Conf. No.: 4285

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Jack S. Oh

Serial No.: 10/083,001

Examiner: Robin Hyrton

Filed: February 26, 2002

Group No.: 3727

For: CLOSURE AND CONTAINER WITH ANTI-BACKOFF CAPABILITY

Mail Stop Non-Fee Amendment (Fee Amendment)

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

- Transmitted herewith is an amendment for this application.
- ☒ Small Entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
☐ Enclosed is a verified statement to establish small entity status.
☐ Other Than a Small Entity.
- The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		LARGE ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	Rate	Addit. Fee
TOTAL	*32	MINUS	**32		x 9	\$	x18	\$
INDEP.	*12	MINUS	***11	1	x43	\$43.00	x86	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+145	\$	+290	\$
					TOTAL FEE	\$43.00	TOTAL FEE	\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ No additional fee for claims is required.☒ Total fee for claims required \$ 43.00.

4. Attached is a check in the sum of \$_____.

☒ Please charge my Deposit Account No. 23-3000 in the amount of \$ 43.00. A duplicate copy of this sheet is attached.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

- (a) _____ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

<u>Extension (months)</u>	<u>Fee for other than small entity</u>	<u>Fee for small entity</u>
_____ one month	\$ 110.00	\$ 55.00
_____ two months	\$ 420.00	\$ 210.00
_____ three months	\$ 950.00	\$ 475.00
_____ four months	\$1,480.00	\$ 740.00
_____ five months	\$2,010.00	\$1,005.00

Fee: \$ _____

_____ Please charge my Deposit Account No. 23-3000 in the amount of \$ _____. A duplicate copy of this sheet is attached.

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

_____ An extension for _____ months has already been secured. The fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.

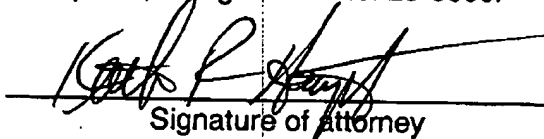
Extension fee due with this request \$ _____.

OR (b)

X Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

X If any additional fee for claims or extension is required, charge Acct. No. 23-3000.

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Cincinnati, Ohio 45202
(513) 241-2324



Signature of Attorney

Keith R. Haupt

Type name of Attorney

Reg. No. 37,638

CERTIFICATE OF FACSIMILE TRANSMISSION

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Lisa L. Tucker
Lisa L. Tucker

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